

# USOE CACTUS Course Change Request

The following form may be used to petition USOE to change elements of a course in the CACTUS course listings. For example you may petition USOE to add an endorsement, expand the grade range, or change the course description.

If you wish to add an Applied Advanced and Supplemental (AAS) designation to an existing course you must also complete part B. Courses carrying an AAS designation satisfy the elective Language Arts, Mathematics and Science graduation requirements. The current list of AAS courses may be found at <http://www.schools.utah.gov/curr/main/GradInfo.htm>. Following this form is a sample rubric USOE will use in evaluating a petition to ass an AAS designation.

After completing the form and obtaining all appropriate signatures from your LEA office, please submit to:

Jennifer Lambert  
Utah State Office of Education  
Curriculum & Instruction  
250 East 500 South  
PO Box 144200, Salt Lake City UT 84114-4200  
Phone: 801-538-7892  
E-mail: [jennifer.lambert@schools.utah.gov](mailto:jennifer.lambert@schools.utah.gov)

Note that USOE publishes all changes and additions to the course listings for the next school year by October 1. Therefore, this form must be submitted to USOE no later than **September 1** of the year preceding the school year you would like the change to take effect. Except for Concurrent courses and in rare exceptions, changes will **not** be made to the course list for the current school year or after October 1 for the next school year.

Before petitioning for any changes, please check the current course listings and the list of upcoming changes to the course list at [http://www.schools.utah.gov/curr/main/Core\\_Codes/default.htm](http://www.schools.utah.gov/curr/main/Core_Codes/default.htm).

If you have any questions, please contact Jennifer Lambert or the appropriate content area specialist.

# USOE CACTUS Course Change Request

Submitter: \_\_\_\_\_ Date: \_\_\_\_\_

Submitter's Title: \_\_\_\_\_ Phone: \_\_\_\_\_

District/School: \_\_\_\_\_

Course Name: \_\_\_\_\_

CACTUS Course Code:  
(11 digit code in the form of 00-00-00-00-000) \_\_\_\_\_

## Part A (Must be completed for all courses)

### 1. Description of Change Requested:

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### 2. Reason for Change:

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### 3. Probable Impact of Change (how many teachers and LEAs will be affected, what would happen if not changed, etc.):

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4. Is the Change Requested for the Current School Year? ☐ Yes\* ☐ No

5. Is this Request Being Made After the Deadline? ☐ Yes\* ☐ No

### \*If Checked 'Yes' Provide Justification:

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## Part B (Must be completed for all AAS courses)

Subject Area:      ☐ Language Arts      ☐ Mathematics      ☐ Science

1. Provide a brief description/overview of the course.

2. List all prerequisites for the course and any comparable courses.

3. Do other schools/districts use this course? Is the rigor similar among schools/districts?

4. List the course objectives as they relate to the subject area.

5. Describe how the course enriches students' knowledge and skills in the subject area.

6. Discuss how the course is developmentally appropriate in content.

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Part C (Must be completed for all courses)

Attach the following:  
(Check those that are attached)

- ☐ Syllabus
- ☐ Core alignment map, if appropriate
- ☐ Sample lesson plan, if appropriate

Other Attached Documentation:  
(Please List)

Signatures:

Submitter	(Title)	Date
District Office	(Title)	Date
District Office as Appropriate	(Title)	Date
District Office as Appropriate	(Title)	Date

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## For USOE Use Only

☐ Approve

☐ Approve With Modification

Modification(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Deny

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Not Approved Due to Lack of Information

Needed Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Signatures:

\_\_\_\_\_  
USOE Course Code Administrator Date

\_\_\_\_\_  
USOE Content Area Specialist Date

\_\_\_\_\_  
USOE Director of Curriculum & Instruction Date

\_\_\_\_\_  
Other USOE Specialist as Appropriate Date

\_\_\_\_\_  
Other USOE Director as Appropriate Date

\_\_\_\_\_  
USOE Superintendent/Board as Appropriate Date

# USOE CACTUS Course Change Request

## Add AAS Evaluation Sheet

**Course:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_

**Title:** \_\_\_\_\_

Element	Notes	N/A	Yes	No	Insufficient Information	Modification
Meets or exceeds specified rubric						
Appropriate measures of student achievement						
Benefits a wide range of students and schools						
Appropriate licenses endorsements						
Other (specify in notes)						

☐ Approve      ☐ Approve w/Modification \_\_\_\_\_

☐ Deny      ☐ Insufficient Information

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date